			Application or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  155603 -0209												
									150	03	-02	07
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			9		*		ĺ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			√ minus 20=		· B			X\$ 9=	***	OR	X\$18=	
IND	EPENDENT CL	AIMS	# minus 3 =		* Ø			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	-	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II									<u> </u>		OTHER	THAN
	(Column 1) (Column 2) (Column							SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	0	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 31	Minus .	** (	W	= [[		X\$ 9=		OR	X\$18=	198
	Independent	·	Minus	***	<u> </u>	= 4		X40=		OR	x€d≡	334
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN	CLAIM		'	+135=		OR	+270=	
•								TOTAL	•		TOTAL	
		′	ADDIT. FEE	, , , , , , , , , , , , , , , , , , , ,		ADDIT. FEE	<del></del>					
AMENDMENT B	3	(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		(Colui HIGH NUM PREVIO PAID	HEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=	" -	OR	X80=	
Ш	FIRST PRESE	NTATION OF MI	JUIPLE DE	-ENDEN]	CLAIM		<b>!</b>	+135=		OR	+270=	
							L	TOTAL		ارا	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			ADDIT. FEE	L
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	° 0	HIGH NUM PREVIO	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	<b>!</b>	X40=			X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∲			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR											TOTAL ADDIT: FEE	
		nber Previously Pa					er fou	ınd in the apı	propriate bo	x in col	umn 1.	